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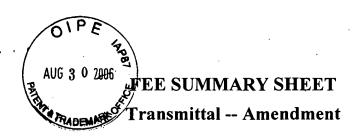
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CUSTOMER NO. 23932 Docket No. TRANSMITTAL LETTER 61181-00003USPX Application No. Filing Date Examiner Art Unit 2112 10/036185-Conf. #4873 December 28, 2001 P. R. Myers Applicant(s): Michele Borgatti et al. Invention: ELECTRONIC SYSTEM HAVING MODULAR EXPANSION FUNCTION FACILITIES TO THE COMMISSIONER FOR PATENTS Transmitted herewith is a Petition for Extension of Time under 37 CFR 1.136(a) in the above-identified application. The fee has been calculated and is transmitted as shown below. **CLAIMS AS AMENDED** Claims Highest Remaining Number Number Extra Claims **Previously** After Rate Amendment Paid Present **Total Claims** 12 20 Х Independent 4 X Claims Multiple Dependent Claims (check if applicable) 120.00 Other fee (please specify): Extension for response within first month 120.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: x Large Entity Small Entity No additional fee is required for this amendment. 10-0447 Please charge Deposit Account No. in the amount of \$ A duplicate copy of this sheet is enclosed. 120.00 X A check in the amount of \$ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. 10-0447 The Director is hereby authorized to charge and credit Deposit Account No. as described below. x Credit and overpayment. Additional filing or application processing fees required under 37 CFR 1.16 and 1.17. August 23, 2006 Dated: Andre M. Szuwals Attorney/Agent Reg. No.: 35,70 JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION 1445 Ross Avenue, Suite 3700 Dallas, Texas 75202 (214) 855-4795 I hereby certify that this paper (along with any paper referred to as be ing/attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in elope addressed to: MS AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Signature (Margo Barbarash) Dated: August 23, 2006

DALLAS2 1191513v1 61181-00003USPX

CUSTOMER NO. 23932						proved for use throug	gh 7/31/2006. OMB		
ابر: Under the Paperwork Reduction A	ct of 1995, no j	person are require	ed to respor			mark Office; U.S. DI ation unless it displa			
L Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
o /				Application Number		10/036185-Conf. #4873			
FEE TRANSMITTAL For FY 2006			Filir	Filing Date		December 28, 2001			
			Firs	First Named Inventor		Michele Borgatti			
			Exa	Examiner Name		P. R. Myers			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 21		2112	112		
TOTAL AMOUNT OF PAYMENT (\$) 120.00			Atto	Attorney Docket No. 61181-000			3USPX		
METHOD OF PAYMENT (check all that apply)									
x Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 10-0447 Deposit Account Name: Jenkens & Gilchrist, a Professional Corporation									
For the above-identified	deposit acco	unt, the Direc	tor is here	by authorize	d to: (che	eck all that apply)		
Charge fee(s) indic	ated below			Charge	e fee(s) ir	ndicated below, e	except for the fi	ling fee	
Charge any additional fee(s) or underpayment of									
FEE CALCULATION (All th	e fees belo	ow are due i	upon fili	ng or may	be subj	ect to a surch	arge.)		
1. BASIC FILING, SEARCH, AN	D EXAMINA	TION FEES							
	FILING F			H FEES	EXAMI	NATION FEES	3		
Application Type Fe		ell Entity ee (\$) Fe	e (\$)	Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid	(\$)	
			500	250	200	100			
Design 2	200	100	100	50	130	65			
_	200	100	300	150	160	. 80			
Reissue 3	300	150	500	250	600	300			
Provisional 2	200	100	0	0	0	0			
2. EXCESS CLAIM FEES							Sma	all Entity	
Fee Description							Fee (\$) F	ee (\$)	
Each claim over 20 (including R							50	25	
Each independent claim over 3 (including Reissues)				•			200	100	
Multiple dependent claims		-			_		360	180	
Total Claims Extra Claim		<u> </u>	ee Paid	\$)	_	Nultiple Depend	Fee Paid (\$)		
HP = highest numer of total claims paid	X I for, if greater t	= han 20.			<u> </u>	ee (\$)	ree Paid (\$)		
· ·	HP = highest numer of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
4 -4=	x =								
HP = highest numer of independent cla	ims paid for, if	greater than 3.			<u> </u>				
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surphings): 1251 Extension for response within first month 120.00									
SUBMITTED BY	Z/1/20	\forall							
Signature	TV			tration No. ney/Agent)	35,701	Telephone	(214) 855-47	 '95	
Name (Print/Type) Andre M. Szur	walski		(Attor	iey/Agerit)		Date	August 23, 20	006	
			1/	0 -					
I hereby certify that this paper (along with any paper referred to as being attached of enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mell in an envelope addressed to: MS AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Dated: August 23, 2006 Signature: (Margo Barbarash)									



Date:

August 23, 2006

Time:

11:26 AM

Docket:

61181-00003USPX

Filing Date:

December 28, 2001

Application No: Total Fee:

10/036185 \$ 120.00

Code	Amount	37 CFR	Fee Description	Listed on
1251	120.00	1.17(a)(1)	Extension for response within first month	Fee Transmittal (PTO SB-17)